



Elk Grove CSD Department of Parks and Recreation  
8820 Elk Grove Blvd., Elk Grove, CA 95624  
Phone (916) 405-5300 • Fax (916) 685-6942

## Contract Instructor Information

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: (day) \_\_\_\_\_ (evening) \_\_\_\_\_ SS # or Fed ID #: \_\_\_\_\_

Subject interested in teaching: \_\_\_\_\_

### Experience related to subject, paid or volunteer (most recent first)

Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_

Duration of position: \_\_\_\_\_ to \_\_\_\_\_ Supervisor: \_\_\_\_\_

Supervisor's Title: \_\_\_\_\_ Day Phone: (\_\_\_\_\_) \_\_\_\_\_

Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_

Duration of position: \_\_\_\_\_ to \_\_\_\_\_ Supervisor: \_\_\_\_\_

Supervisor's Title: \_\_\_\_\_ Day Phone: (\_\_\_\_\_) \_\_\_\_\_

Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_

Duration of position: \_\_\_\_\_ to \_\_\_\_\_ Supervisor: \_\_\_\_\_

Supervisor's Title: \_\_\_\_\_ Day Phone: (\_\_\_\_\_) \_\_\_\_\_

### Education, special training and/or certificates:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(over)

**References** (please do not list relatives)

1. \_\_\_\_\_ Day Phone: (\_\_\_\_) \_\_\_\_\_
2. \_\_\_\_\_ Day Phone: (\_\_\_\_) \_\_\_\_\_
3. \_\_\_\_\_ Day Phone: (\_\_\_\_) \_\_\_\_\_

**Convictions:**

Conviction of a crime is not necessarily a bar to contract employment. Each case is considered separately based on job requirements.

1. Have you been convicted by any court of an offense? \_\_\_\_yes \_\_\_\_no  
*Omit: minor traffic violations, and offense committed prior to your 18th birthday which was finally adjudicated in a juvenile court or under a youth offender law, any incident sealed under Welfare and Institutions Code #781 or Penal Code #1203.45.*

2. If "yes", state what offense, when, where and disposition of case

\_\_\_\_\_  
\_\_\_\_\_

My signature affirms that all information is true to the best of my knowledge and belief:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Please return to:***

***Leisure Staff***

*Elk Grove CSD Department of Parks & Recreation*

*8820 Elk Grove Blvd., Ste. #3*

*Elk Grove, CA 95624*

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